National Transportation Safety Board NTSB ID: DCA89MA063 Aircraft Registration Number: N1819U FACTUAL REPORT Occurrence Date: 07/19/1989 Most Critical Injury: Fatal AVIATION Occurrence Type: Accident Investigated By: NTSB Location/Time Nearest City/Place Zip Code Local Time Time Zone State 51102 1600 CDT SIOUX CITY IΑ Distance From Landing Facility: 0 Direction From Airport: 0 Airport Proximity: On Airport Aircraft Information Summary Aircraft Manufacturer Model/Series Type of Aircraft MCDONNELL DOUGLAS DC-10-10 Airplane Sightseeing Flight: No Air Medical Transport Flight: No Narrative Brief narrative statement of facts, conditions and circumstances pertinent to the accident/incident:

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FACTUAL REPORT	Occurrence Date: 07/19/1989										
AVIATION	Occi	Occurrence Type: Accident									
Landing Facility/Approach Information											
Airport Name	Airport ID:	Airport Eleva	tion	Runway	Used	Runwa	y Lengt	y Length Runway V			
SIOUX GATEWAY	SUX	1098 Ft.	98 Ft. MSL 22			6600			150		
Runway Surface Type: Concrete				•					·		
Runway Surface Condition: Dry											
Type Instrument Approach: NONE											
VFR Approach/Landing: Forced Landing											
Aircraft Information											
Aircraft Manufacturer MCDONNELL DOUGLAS		Model/ DC-1						Serial 4661	Il Number		
		DC-1	0-10					4001	0		
Airworthiness Certificate(s): Transport											
Landing Gear Type: Retractable - Tricycle											
Homebuilt Aircraft? No Number of Seats									ines: 3		
Engine Type: Turbo Fan	nufacturer:	er: Model/Series: CF6-6D						Rated Power: 51000 LBS			
- Aircraft Inspection Information											
Type of Last Inspection		Date of Las	ate of Last Inspection Time Since Last Inspection						Airframe Total Time		
Unknown							0 Ho	urs		Hours	
- Emergency Locator Transmitter (ELT) Information											
ELT Installed? No ELT Oper	ated?			ELT Aid	ded in Lo	cating Acc	ident S	ite?			
Owner/Operator Information											
Registered Aircraft Owner			Street Address								
			City								
		Street A	ddress								
Operator of Aircraft			P. O. BO	X 66100)						
UNITED AIRLINES	City CHICAGO							State IL	Zip Code 60666		
Operator Does Business As:	·	Operator Designator Code: UALA									
- Type of U.S. Certificate(s) Held:											
Air Carrier Operating Certificate(s): Flag Carrier/Do	omestic										
Operating Certificate:			Operator C	Certificate:	<u> </u>						
Regulation Flight Conducted Under: Part 121: Air (Carrier										
Type of Flight Operation Conducted: Scheduled; D	omestic	; Passenger	Only								
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FACTUAL REPORT
AVIATION

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Occurrence Date: 07/19/1989

AVIATI AVIATI	Occurrence Type: Accident												
First Pilot Information													
Name City											te	Date of Birth	Age
On File On Fil								ile On File					57
Sex: M Seat Occupied	n Pilot	Certificate Number:											
Certificate(s): Airline Transport													
Airplane Rating(s): Multi-engine Land; Single-engine Land													
Rotorcraft/Glider/LTA:													
Instrument Rating(s): Airp	lane												
Instructor Rating(s):													
Type Rating/Endorsement for	or Accident/Ir	cident Aircra	ft? Yes			С	urrent E	Biennia	l Flight R	eview	<i>i</i> ?		
Medical Cert.: Class 1	Medica	al Cert. Status	s: Valid Me	dicalw/ wa	ivers/lir	n.			ate of La	st Me	edical E	xam: 03/1989	
	•												
- Flight Time Matrix	All A/C	This Make and Model	Airplane Single Engine	Airplane Mult-Engine	Nigh	light Instrument Actual Simulated					Rotorcraft	Glider	Lighter Than Air
Total Time	29967	7190											
Pilot In Command(PIC)													
Instructor								\rightarrow		\perp			
Last 90 Days	213												
Last 30 Days	74							_		\perp			
Last 24 Hours	2				 								
Seatbelt Used?	Shou	lder Harness	Used?			Гохісс	ology Pe	erforme	ed? No		Se	econd Pilot? Ye	es .
Flight Plan/Itinerary													
Type of Flight Plan Filed: IF	R												
Departure Point						State		Airport Identifier		er Departure		ture Time	Time Zone
DENVER								DEN			1409		CDT
Destination State Airport Identifier													
CHICAGO							ORD						
Type of Clearance: IFR													
Type of Airspace:													
Weather Information													
Source of Briefing: Comp	any												
Method of Briefing:													
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Occurrence Date: 07/19/1989

Occurrence Type: Accident

	FTYBOR				.) [710010011	•								
Weather Information															
WOF ID	Observation Time	Time Zone	WOF	Elevation	1	WOF Distance From Accident Site					Direction From Accident Site				
SUX	0000			0 Ft. M	1SL	0 NM					0 Deg. Mag.				
Sky/Lowest Cloud Condition: Unknown 0 Ft. AGL Condition								Condition o	f Ligh	nt: Day					
Lowest Ce	iling: Broken	GL	Visibi	lity:	15	SM	Altii	meter: 30.00 "H		"Hg					
Temperatu	Temperature: 27 °C Dew Point: 14 °C Wind Direction: 10 Density Altitude:							0	Ft.						
							ner Condtions at Accident Site: Visual Conditions								
Visibility (F	lity (RVR): 0 Ft. Visibility (RVV) 0 SM Intensity of Precipitation: Unknown														
Restriction	s to Visibility: None	•													
Type of Pro	ecipitation: None														
Accident	Information														
Aircraft Damage: Destroyed Aircraft Fire: Ground Aircraft Explosion Ground															
Classificati	ion: U.S. Registered/U	.S. Soil													
- Injury Su	mmary Matrix	Fatal	Serious	Minor		None TOTAL									
First Pi	ilot				1		1								
Second	d Pilot				1		1								
Studen	nt Pilot														
Flight I	nstructor														
Check	Pilot				1		1								
Flight E	Engineer				1		1								
Cabin /	Attendants	1	6				7								
Other (Crew														
Passer	ngers	110	41	1	21	13	285								
- TOTAL A	ABOARD -	111	47	1	25	13	296								
Other (Ground	0	0		0		0								
- GRANE	O TOTAL -	111	47	1	25	13 296									

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FACTUAL REPORT

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AYIATION	Occurrence Type: Accident	
Administrative Information		
Investigator-In-Charge (IIC)		
R MACINTOSH		
Additional Persons Participating in This Accident/Incid	ent Investigation:	